

=== COVER PAGE ===

TO: \_\_\_\_\_

FROM: BRINKS FAX

FAX: 13123214299

TEL: 13123214200

COMMENT:

**FACSIMILE COVER SHEET****RECEIVED  
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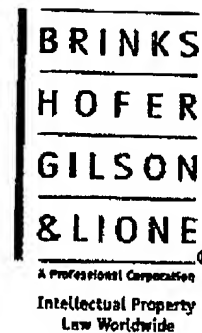
Date: April 12, 2006

To: Commissioner for Patents  
Fax No: (571) 273-8300From: G. Peter Nichols  
Tel. No: 312.321.4276Your Ref. No.: U.S. Serial No. 10/731,612 (Dils et al.)  
Our Client/Matter No.: 10710/623 (PTG 0633 PUS2)No. of Pages  
(inc. this page): 6

Confirmation Copy To Follow: Yes No

IF YOU HAVE ANY PROBLEMS RECEIVING THIS MESSAGE,  
PLEASE CALL 312-321-4200 AND ASK FOR: Alexandra Manolas - Ext. 3446

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**COVER MESSAGE:**

APR 12 2006

<b>CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8</b> I hereby certify that this correspondence is being sent by telephone facsimile to (571) 273-8300: Date: <u>April 5, 2006</u> Name: <u>G. Peter Nichols</u> Signature: _____	
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**BRINKS  
HOFFER  
GILSON  
& LIONE**
**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Appln. of: Dils et al.

Appln. No.: 10/731,612

Filed: December 9, 2003

For: ERGONOMIC MITER SAW HANDLE

Attorney Docket No: 10710/623 (PTG 0633 PUS2)

Examiner: Nguyen

Art Unit: 3724

 Commissioner for Patents  
 P. O. Box 1450  
 Alexandria, VA 22313-1450

**TRANSMITTAL**

Sir:

## Attached is/are:

- ☒ Supplemental Response  
☐ Return Receipt Postcard

## Fee calculation:

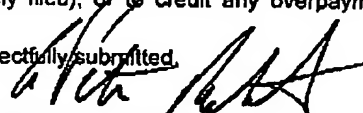
- ☐ No additional fee is required.  
☐ Small Entity.  
☐ An extension fee in an amount of \$\_\_\_\_\_ for a \_\_\_\_\_-month extension of time under 37 C.F.R. § 1.136(a).  
☐ A petition or processing fee in an amount of \$\_\_\_\_\_ under 37 C.F.R. § 1.17(\_\_\_\_).  
☐ An additional filing fee has been calculated as shown below:

					Small Entity			Not a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total	9	Minus	20	0	x \$25=			x \$50=	0
Indep.	1	Minus	3	0	x 100=			x \$200=	
First Presentation of Multiple Dep. Claim					+\$180=			+\$360=	
					Total	\$		Total	\$0

## Fee payment:

- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.  
☐ Please charge Deposit Account No. 23-1925 in the amount of \$\_\_\_\_\_. A copy of this Transmittal is enclosed for this purpose.  
☐ Payment by credit card in the amount of \$\_\_\_\_\_ (Form PTO-2038 is attached).  
☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.

Respectfully submitted,



G. Peter Nichols (Reg. No. 34,401)

 April 12, 2006  
 Date

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I hereby certify that this correspondence is being sent  
by telephone facsimile to (571) 273-8300 on

April 12, 2006

Date of Transmission

G. Peter NicholsName of applicant, assignee or  
Registered Representative  
SignatureApril 12, 2006

Date of Signature

**Case No. 10710/623  
(PTG 0633 PUS2)****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Dils et al.

Serial No.: 10/731,612

Filed: December 9, 2003

For: ERGONOMIC MITER SAW HANDLE

Examiner: Nguyen

Group Art Unit: 3724

**SUPPLEMENTAL RESPONSE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated January 12, 2006, please reconsider the  
claims in light of the following amendments and remarks.